

10/591957  
IAP9 Rec'd PCT/PTO 08 SEP 2006

APPLICATION DATA SHEET

Application Information

Application Type: National Phase  
Subject Matter: Utility  
Suggested Classification:  
Suggested Group Art Unit:  
CD-ROM or CD-R?: None  
Number of CD disks:  
Number of copies of CDs:  
Sequence submission?:  
Computer Readable Form (CRF):  
Number of copies of CRF:  
Title: TRICYCLIC IMIDAZOPYRIDINES  
Attorney Docket Number: 27598U  
Request for Early Publication?: No  
Request for Non-Publication?: No  
Suggest Drawing Figure:  
Total Drawing Sheets: 0  
Small Entity?: No  
Latin name:  
Variety denomination name:  
Petition included?: No  
Petition Type:  
Licensed U.S. Govt. Agency:  
Contract or Grant Numbers:  
Secrecy Order in Parent Appl.?:

**Applicant Information (1)**

Applicant Authority type: Inventor  
Primary Citizenship Country: DE  
Status: Full Capacity  
Given Name: Andreas  
Middle Name:  
Family Name: PALMER  
Name Suffix:  
City of Residence: Singen

State or Province of Residence:  
Country of Residence: DE  
Street of Mailing address: Mägdebergstr. 2  
City of mailing address: Singen  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78224

**Applicant Information (2)**

Applicant Authority type: Inventor  
Primary Citizenship Country: DE  
Status: Full Capacity  
Given Name: Wilm  
Middle Name:  
Family Name: BUHR  
Name Suffix:  
City of Residence: Konstanz  
State or Province of Residence:  
Country of Residence: DE  
Street of Mailing address: Zum Kirchenwald 20  
City of mailing address: Konstanz  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78465

**Representative Information**

Representative Customer Number:	034375
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**Domestic Priority Information**

Application:	Continuity Type:	Parent Application:	Parent Filing Date:

**Foreign Priority Information**

Country:	Application number:	Filing Date:	Priority Claimed:
EP	04101092.7	March 17, 2004	Yes
EP	04106577.2	December 14, 2004	Yes

**Assignee Information**

Assignee name: Altana Pharma AG  
Street of mailing address: Byk-Gulden-Str. 2  
City of mailing address: Konstanz  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78467